FORM **CD-529**
(1-94) LF

U.S. DEPARTMENT OF COMMERCE

LUMP SUM LEAVE OR COMPENSATORY TIME PAYMENTS

1. SOCIAL SECURITY NUMBER	2. NAME *(Last, FIrst, Middle Initial)*

3. AGENCY CODE	4. DATE OF SEPARATION *(If Applicable)*	5. TYPE OF PAYMENT 0= INTERIM 1= FINAL	6. TAX 0= N/A 1= 20% TAX	7. MINUS S/L 0= N/A 1= FORGIVEN	8. PAY COLA 0= NO 1= YES	9. PAY AUO 0= NO 1= YES
	MO DAY YR					

10. WAGE EMPLOYEE SHIFT RATE HOURS

1ST	2ND	3RD	VAR	11. DATES LUMP SUM PAYMENT CARRIES THROUGH			12. HOURS APPLI-CABLE TO LAST DAY OF LSP	13. TOTAL HOURS TO BE PAID
				A. A/L RESTORED MO DAY YR	B. A/L WITHIN CEILING MO DAY YR	C. A/L ABOVE CEILING MO DAY YR		

MANUAL PAY DATA (FOR NFC USE ONLY)

14. PAY CODE 1= UPDATE ONLY 2= UPDATE ONLY EXCEPT QTD	15. SCHEDULE NUMBER	16. GROSS PAY	17. FEDERAL TAX	18. FICA	19. HOSPITAL INSURANCE

20. STATE TAX		21. CITY TAX			22. COUNTY TAX			22A. RECEIPT ACCOUNT		23. AMOUNT NET PAY
ST. CD	AMOUNT	ST. CD	CITY CD	AMOUNT	ST. CD	COUN. CD	AMOUNT	NUMBER	AMOUNT	

24. ACCOUNTING DATA USAGE CODE 0= COMPLETE BLOCK 25 1= USE DATA BASE	26. TOTAL LINES OF ACCOUNTING DATA	27. REMARKS

25. ACCOUNTING DATA	HOURS	FRAC	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			28. EMPLOYING OFFICE CODE / 29. REHIRE DATE AFTER SEPARATION
(8)			MONTH DAY YEAR
(9)			30. T&A CONTACT POINT
(10)			AGENCY STATE TOWN UNIT TIMEKEEPER

31. TOUR OF DUTY *(Hours Per Day)*

		1ST WEEK							2ND WEEK				
SUN	MON	TUES	WED	THURS	FRI	SAT	SUN	MON	TUES	WED	THURS	FRI	SAT

32. AUDIT FOR LEAVE		BROUGHT FORWARD	EARNED	USED	BALANCE OR TOTAL	32B. LEAVE YEAR
32A. T Y P E O F L E A V E	RESTORED ANNUAL					
	ANNUAL					32C. LEAVE CATEGORY
	SICK					32D. SERVICE COMP DATE
	AWOP					32E. EOD *(If in Year of Audit)*
	COMP					RATE
						RATE
						RATE

33. APPROVAL			**FOR NFC USE ONLY**	
SIGNATURE OF AUTHORIZED OFFICIAL	TITLE	DATE	INITIALS	DATE

INSTRUCTIONS

**Prepare a separate document for either a Lump Sum Payment or a Compensatory Time Payment.
Do not complete blocks 7 through 12 for a Compensatory Time Payment.**

BLOCK 1. Enter employee's social security number.

BLOCK 2. Enter employee's last name, first name, and middle initial.

BLOCK 3. Enter the two-digit agency code for the agency charged with the payment.

BLOCK 4. Enter the separation date, if applicable.

BLOCK 5. Enter applicable code. Only one block should contain an entry.

BLOCK 6. Enter "0" if the payment will be taxed according to the tax code in the employee's payroll master. Enter "1" if the 20% tax is to be applied to the payment.

BLOCK 7. Enter "0" if there is no advance sick leave to be forgiven. Enter "1" if the employee has advance sick leave to be forgiven.

BLOCK 8. Enter "0" if there is no COLA to be paid. If there is a COLA amount due the employee, enter "1".

BLOCK 9. Enter "0" if there is no Administrative Uncontrollable Overtime (AUO) to be paid. Enter "1" if AUO is due.

BLOCK 10. When the payment to be made is based on wage shift rates, enter the number of hours under the appropriate rate column. Fractions of any hour may be entered an "½", "¾", etc.

BLOCK 11. Enter the projected date through which the lump sum payment carries for A—annual leave restored; B—annual leave within ceiling; and C—annual leave above ceiling.

BLOCK 12. Enter the hours applicable to the last day of the lump sum payment.

BLOCK 13. Enter the total hours to be paid.

BLOCK 24. Enter "0" if accounting data is furnished in block 25. Enter "1" if accounting data in employee's data base record is to be used.

BLOCK 25. Enter accounting data codes to which the payment is being charged and the number of hours charged to each code. Leave blank if "1" is entered in block 24.

BLOCK 26. Enter the total amount of line items completed in block 25.

BLOCK 27. Enter any information pertinent to the payment which is not furnished elsewhere on the form.

BLOCK 28. Enter the four-digit employing office code.

BLOCK 29. Enter the date the employee was rehired, if previously separated.

BLOCK 30. Enter the T&A contact point.

BLOCK 31. Enter daily hours for employee's established tour of duty.

BLOCK 32A. Enter amount of leave brought forward, earned, used, and balance or total on hand for each type leave (restored annual, annual, sick, AWOP, and comp). Enter the rate used to compute comp time.

B. Enter leave year being audited.

C. Enter employee's leave category.

D. Enter employee's service computation date.

E. Enter date employee entered on duty only if date is in year of audit.

BLOCK 33. Enter signature and title of agency offical authorized to approve payment, and the date the form is prepared.